

RAFAEL JORGE <rafaeljorge584@comcast.net>

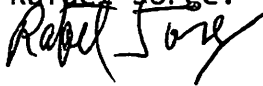
8/1/2022 2:50 PM

To RAFAEL JORGE <rafaeljorge584@comcast.net>

Here is the proof of the documents that I took to court on July 20 and 21, there were photos, some account statements and some proof that I mentioned, and a Motion on the 21st, which I also sent to Marie Adler.

Thank you.

Rafael Jorge.



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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>	<p>A. Signature <input checked="" type="checkbox"/> X <i>Sp</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>
<p>1. Article Addressed to: <i>MARIE ADLER</i> <i>8721 SANTA MONICA,</i> <i>BVD # 312</i> <i>W. HOLLYWOOD, CA 90069</i></p>	<p>B. Received by (Printed Name) <i>Mailbox Place</i> C. Date of Delivery</p>
<p>2. Article Addressed to: <i>MARIE ADLER</i> <i>8721 SANTA MONICA,</i> <i>BVD # 312</i> <i>W. HOLLYWOOD, CA 90069</i></p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>	<p>9</p>
<p>9590 9402 6972 1225 1118 14</p> <p>9590 9402 6972 1225 1118 14</p> <p>EI 206 165 621 US</p>	
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>	<p>A. Signature <input checked="" type="checkbox"/> X <i>Sp</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>
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<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>	<p>2</p>
<p>9590 9402 6972 1225 1118 45</p> <p>9590 9402 6972 1225 1118 45</p> <p>EI 206 165 595 US</p>	
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt

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